



HDP/SB/21 based on PTO/SB/21 (08-00) *AF/2/203*  
*2200*

|                                                                                            |                      |                        |                 |
|--------------------------------------------------------------------------------------------|----------------------|------------------------|-----------------|
| <b>TRANSMITTAL FORM</b><br><i>(to be used for all correspondence after initial filing)</i> | Application Number   | 09/316,040             |                 |
|                                                                                            | Filing Date          | May 21, 1999           |                 |
|                                                                                            | First Named Inventor | Phillip William GILLIS |                 |
|                                                                                            | Group Art Unit       | 2122                   |                 |
|                                                                                            | Examiner Name        | DAS, Chameli           |                 |
|                                                                                            |                      | Attorney Docket Number | 29250-000224/US |

| ENCLOSURES (check all that apply)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
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| <input checked="" type="checkbox"/> Fee Transmittal Form<br><br><input checked="" type="checkbox"/> Fee Attached<br><br><input checked="" type="checkbox"/> Amendment<br><input checked="" type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input checked="" type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><input type="checkbox"/> Letter to the Official Draftsperson and ( ) Sheets of Formal Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> LETTER SUBMITTING APPEAL BRIEF AND APPEAL BRIEF (w/clean version of pending claims)<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>RECEIVED</b><br><br>JUL 18 2003<br><br>Technology Center 2100                                                                                                                                                                                                                                                                                                                                                                                        |
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| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |                                  |                                     |                    |
|--------------------------------------------|----------------------------------|-------------------------------------|--------------------|
| Firm or Individual name                    | Harness, Dickey & Pierce, P.L.C. | Attorney Name<br>John A. Castellano | Reg. No.<br>35,094 |
| Signature                                  | <i>[Signature]</i>               |                                     |                    |
| Date                                       | July 16, 2003                    |                                     |                    |